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MEDICAL SOCIETY OF THE

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MEDICAL AND SURGICAL

FOR 1

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# EXPLANATIONS AND DIRECTIONS.

According to the arrangement of the accompanying blanks, it is intended that they shall be a faithful monthly record of the Diseases, Accidents, &c., occurring in the practice of the Physician and Surgeon in whose hands they may be placed.

In the registration of observations which may be made in reference to medical or surgical cases, it is recommended that the various items of information, as soon as they are obtained, be immediately noted down, in order to secure accuracy in the statistics, in the appropriate columns of the blanks, according as they are designated by their headings. The name of the disease, character of the accident, &c., must be written as distinctly as possible, and it is requested that the classified nomenclature herewith appended, be consulted as a guide in the registrations. It is desirable that they should be accompanied by remarks or explanatory notes from each individual observer, stating in particular the pathological indications afforded by post-mortem examinations; also, any peculiarities that may have manifested themselves during the progress of the disease, either in respect to epidemical or endemical influences, or the marked effects of remedial agents. *Accurate diagnosis should characterize every registration.* The column assigned to the "Initials of Patient," has been added merely for the convenience of the Physician keeping the registration as a guide in recalling the circumstances of the case. In recording the age of the patient attach simply the letters Y. M. or D. for years, months or days, to the figure designating the age, omitting fractional portions of each, whenever they occur; and under the headings Sex, Color, Civil Condition, Temperate, Intemperate, Termination, Result of Accidents, Result of Anaesthesia, the simple insertion of the figure 1 will be all that is necessary. The columns devoted to the registration of Occupation, Place of Birth, &c., sufficiently explain themselves. In the "Obstetrical Record," under the head of Presentations, it is requested that the subjoined abbreviations be employed.\* It is expected that the blank spaces left for registration of cases, will be amply sufficient as a general rule; but if in any case they should fall short, an extra copy of these blanks may be obtained by application to the Chairman of the undersigned Committee.

The monthly registrations for the year ending on the 31st of December, must be transmitted to the Committee on Medical and Surgical Statistics, who will arrange an accurate digest of all the registrations sent them, and present the same at the annual meeting of the State Medical Society. Every statistical table received, will be carefully preserved and deposited with the Secretary of the State Society, from whom it may be obtained by the respective Registrar. It will be observed that the system of registration adopted for 1858, has been somewhat modified in the present blanks, and it is to be hoped that it will be more acceptable to the profession and effective in its operation.

J. G. ORTON, BINGHAMTON, N. Y.  
C. B. COVENTRY, UTICA, N. Y.  
M. F. COGSWELL, ALBANY, N. Y.

*Com. on Medical and Surgical Statistics.*



# NOMENCLATURE OF DISEASES,

## CLASSIFIED FOR STATISTICAL PURPOSES.

### Endemic and Contagious Diseases.

#### I. ZYMOTIC OR EPIDEMIC.

1. Cholera.
2. Cholera Infantum.
3. Croup—Spasmodic.  
Membranous.
4. Diarrhoea.
5. Dysentery.
6. Erysipelas.
7. Fever—Intermittent.  
Remittent.  
Enteric or Typhoid.  
Typhus.
8. Whooping Cough.
9. Influenza.
10. Measles.
11. Scarlatina—Simplex.  
Anginosa.  
Maligna.
12. Small Pox.
13. Syphilis.
14. Thrush.

### Of Uncertain or General List.

#### II. SPORADIC DISEASES.

15. Atrophy.
16. Cancer.
17. Debility.
18. Dropsy.
19. Gout.
20. Hemorrhage.
21. Malformation.
22. Scrofula.
23. Sudden Death, cause unknown.

#### III. OF THE NERVOUS SYSTEM.

24. Apoplexy.
25. Cephalitis.
26. Chorea.
27. Convulsions.
28. Delirium Tremens.
29. Epilepsy.
30. Hydrocephalus.
31. Insanity.
32. Paralysis.
33. Tetanus.
34. Brain, diseases of.

#### IV. ORGANS OF RESPIRATION.

35. Asthma.
36. Bronchitis.
37. Tuberculosis.
38. Hydrothorax.
39. Laryngitis.
40. Pleurisy.
41. Pneumonia.
42. Quinsy.
43. Organs, &c., diseases of.

#### V. ORGANS OF CIRCULATION.

44. Aneurism.
45. Pericarditis.
46. Organs, &c., diseases of.

#### VI. OF THE DIGESTIVE ORGANS.

47. Ascites.
48. Dyspepsia.
49. Enteritis.
50. Gastritis.
51. Hernia.
52. Intussusception.
53. Peritonitis.
54. Teething.
55. Ulceration.
56. Worms.
57. Organs, &c., diseases of.
58. Pancreas, diseases of.
59. Hepatitis.
60. Jaundice.
61. Liver, diseases of.
62. Spleen, diseases of.

#### VII. OF THE URINARY ORGANS.

63. Diabetes.
64. Systitis.
65. Calculi.
66. Nephritis.
67. Organs, &c., diseases of.

#### VIII. ORGANS OF GENERATION.

68. Puerperal Fever.
69. Rupture of Uterus.
70. Organs, &c., diseases of.

#### IX. ORGANS OF LOCOMOTION.

71. Rheumatism.
72. Joints, &c., diseases of.

73. Hip, diseases of.
74. Spine, diseases of.

#### X. INTEGUMENTARY SYSTEM

75. Purpura.
76. Skin, diseases of.

#### XI. OLD AGE.

77. Old Age, death from.

#### XII. EXTERNAL CAUSES.

78. Drowned.
79. Burns and Scalds, death from.
80. Frozen, death from.
81. Glanders.
82. Heat, death from.
83. Hydrophobia.
84. Intemperance.
85. Lightning.
86. Malpractice.
87. Poisoned.
88. Strangulated.
89. Starvation.
90. Suicide.
91. Still Born.
92. Wounds—Gun Shot, &c.
93. Amputations—

Upper Extremity.  
Lower Extremity.  
At the Joint.  
Beyond the Joint.

94. Fractures—
- Upper Extremity.  
Lower Extremity.  
Deformed.  
Not Deformed.

95. Dislocations—
- Upper Extremity.  
Lower Extremity.  
Reduced.  
Unreduced.

96. Anaesthesia—
- By Chloroform.  
By Ether.  
By Amylene.  
Ill effects from.  
Death caused by.

**\*OBSTETRICAL RECORD.**—Under the head of Presentations use the following Abbreviations:—

<i>For the Vertex.</i> —Left Occipito—Iliac.....	L. O. I.
Right Occipito—Iliac.....	R. O. I.
Occipito—Pubic.....	O. P.
Occipito—Sacral.....	O. S.
<i>Face.</i> —To the Right Side.....	F. R.
Left Side.....	F. L.
<i>Shoulder.</i> —Right Shoulder, Back Anterior.....	R. S. B. A.
Left Shoulder, Back Anterior.....	L. S. B. A.
Right Shoulder, Back Posterior.....	R. S. B. P.
Left Shoulder, Back Posterior.....	L. S. B. P.
<i>Pelvis.</i> —Back to the Left.....	P. B. L.
Back to the Right.....	P. B. R.
Back to the Anterior.....	P. B. A.
Back to the Posterior.....	P. B. P.



MEDICAL AND SUR

*From the County of*

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c.	DATE OF ATTACK.	INITIALS OF PATIENT.	AGE.	SEX.		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH.	Time taken to Incur.	Average Duration of Disease.	TERMINATION.	
				Male.	Female.	White.	Black.	Single.	Married.	Widowed.					Recor'd.	Died.

# GICAL STATISTICS.

Registered by

M. D., Residence,

## RESULT OF ACCIDENTS.

## RESULT OF ANAESTHESIA.

## OBSTETRICAL RECORD.

## REMARKS AND EXPLANATORY NOTES.

Deform'd	Not Deform'd	Reduced.	Not Reduced.	Successful.	Ill Effects.	Death.	No. of Pregnancy	Age of Patient.	Presentation.	Sex of Child.	Hours in Labor.	Natural.	Artificial.	Ergot Used?
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MEDICAL AND SUR

*From the County of*

*for the Month of*

1859.

DISEASES, ACCIDENTS, &c.	DATE OF ATTACK.	INITIALS OF PATIENT.	AGE.	SEX.		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH.	Temperature.	Pulse-rate.	Average Duration of Disease.	TERMINATION.	
				Male.	Female.	White.	Black.	Single.	Married.	Widowed						Recovered.	Died.



# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.								REMARKS AND EXPLANATORY NOTES.
Deformed	Not Deformed	Reduced	Not Reduced	Successful	Ill Effects	Death	No. of Pregnancy	Age of Patient	Presentation	Sex of Child	Position in Labor	Natural	Artificial	Ergot Used	

MEDICAL AND SUR

*From the County of* \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c.	DATE OF ATTACK.	INITIALS OF PATIENT.	AGE.	SEX.		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH.	Temperature.	Pulse rate.	Average Duration of Disease.	TERMINATION.	
				Male.	Female.	White.	Black.	Single.	Married.	Widowed						Recov'd.	Died.

# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Successful	Ill Effects	Death	No of Pregnancy	Age at Partur.	Presentation	Sex of Child	Position	Force	Artificial	Drugs Used			

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c.	DATE OF ONSET	INITIALS OF PATIENT	AGE	SEX		COLOR		CIVIL CONDITION			OCCUPATION	PLACE OF BIRTH	Duration of Disease	TERMINATION	
				Male	Female	White	Black	Single	Married	Widowed				Recovered	Died



# GICAL STATISTICS.

Registered by \_\_\_\_\_ M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Ill Effects	Death	No of Pregn'cy	Age of Patient	Presentation	Sex of Child	How Delivered	Force Used	Artificial	Drugs Used			

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DEGREE OF ATTACK	INITIALS OF PATIENT	AGE	SEX		COLOR		CIVIL CONDITION			OCCUPATION	PLACE OF BIRTH	TIME OF YEAR	REASON OF DEATH	TERMINATION	
				Male	Female	White	Black	Single	Married	Widowed					Recovered	Died

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Ill Effects	Death	No. of Pregu'cy	Age of Patient	Presentation	Sex of Child	How Deliv'd	X	L	Ant-head	Engot Used		

**MEDICAL AND SUR**

*From the County of*

for the Month of \_\_\_\_\_

1859.

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# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd.	Reduced.	Not Reduced.	Success-ful.	Ill Effects.	Death.	No. of Pregn'cy	Age of Patient	Presen- tation.	Sex of Child.	Position.	Force.	Use of Anaesthetic.	Ergot Used?	

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DATE OF ATTACK	INITIALS OF PATIENT	AGE	SEX.		COLOR.		CIVIL CONDITION			OCCUPATION.	PLACE OF BIRTH	TEMPER- TURE	PULSE	RESPIR- ATION	ANALYSIS Duration of Disease.	TERMINATION	
				Male.	Female	White	Black	Single	Married	Widowed							Recover'd	Died

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced.	Not Reduced	Success- ful.	Efforts	Death.	No of Pregn'cy	Age of Patient	Presen- tation.	Sex of Child	Position	No. of Anesthet.	Ergot Used		

**MEDICAL AND SUR**

*From the County of.*

*for the Month of*

1859.

DISEASES, ACCIDENTS, &c	DATE OF APPEAR	INITIALS PATIENT	AGE	SEX		COLOR		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	TEMPER- ament	In- crease of Weight	Amount Discharge of Uterine	TERMINATION	
				Male	Female	White	Black	Single	Married	Widowed						Recovery	Died



# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Ill Effects	Death	No of Pregn'y	Age of Patient	Presentation	Sex of Child	Position	X	Artificial	Ergot Used?			

**MEDICAL AND SUR**

*From the County of*

for the Month of \_\_\_\_\_

...1859.

[illegible]

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Success in	Fil Effects	Death	No of Pregn'cy	Age of Patient	Presen- tation	Sex of Child	Bo- tal	Sex of	No of	Art Used	Art Used	Art Used	

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DATE OF ATTACK	INITIALS OF PATIENT	AGE	SEX		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	Time lost Inactivity of patient	Average Duration of Disease.	TERMINATION	
				Male	Female	White.	Black.	Single	Married	Widowed					Recov'd	Died



# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Uninjured	Not Reduced	Successful	Ill Effects	Death	No. of Pregnancy	Age of Patient	Presentation	Sex of Child	How Taken	Natural	Artificial	Instrument Used	

# MEDICAL AND SUR

*From the County of.*

for the Month of \_\_\_\_\_

...1859.

DISEASES, ACCIDENTS, &c	DATE OF APPEAR	INITIALS OF PATIENT	AGE	SEX.		COLOR.		CIVIL CONDITION			OCCUPATION.	PLACE OF BIRTH	Temper- ament	In- tel- lect	Average Dura- tion of Disease.	TERMINATION	
				Male	Female	White.	Black.	Single	Married	Widowed						Recovered	Died.

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Ill Effects	Death.	No of Pregn'cy	Age of Patient	Presentation.	Sex of Child	How born	X	L. An. used	Ergot Used			

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DATE OF ATTACK	INITIALS PATIENT	AGE	SEX.		COLOR.		CIVIL CONDITION			OCCUPATION.	PLACE OF BIRTH	Time taken to cure	Duration of Disease.	TERMINATION	
				Male	Female	White.	Black.	Single	Married	Widowed					Recov'd	Died

# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced.	Not Reduced	Success- ful	Ill Effects	Death.	No of Pregn'cy	Age of Patient	Presen- tation.	Sex of Child	How born	Normal	Abnormal	Ergot Used?	

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DATE OF ATTACK	INITIALS OF PATIENT	AGE	SEX.		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	Time of Life. Years. Months. Days.	Acute or Chronic Disease.	TERMINATION	
				Male	Female	White	Black	Single	Married	Widowed					Recov'd	Died



# GICAL STATISTICS.

Registered by \_\_\_\_\_ M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA			OBSTETRICAL RECORD							REMARKS AND EXPLANATORY NOTES
Deform'd	Not Deform'd	Rescued.	Not Rescued	Success-ful.	Ill Effects	Death.	No of Pregn'cy	Age of Patient	Presen-tation	Sex of Child	Time of Delivery	X	Art. Assist.	Ergot Used?

**MEDICAL AND SUR**

*From the County of*

for the Month of \_\_\_\_\_

...1859.

[illegible]

# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced.	Not Reduced	Success-ful.	Ill Effects	Death.	No of Pregn'cy	Age of Patient	Presen-tation.	Sex of Child	Position.	No. of Attempts	Artificial	Errot Used	

**MEDICAL AND SUR**

*From the County of.*

*for the Month of*

1859.

DISEASES, ACCIDENTS, &c	DATE OF ATTACK	INITIALS OF PATIENT	AGE	SEX.		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	Time taken to die.	In the day.	Average duration of disease.	TERMINATION	
				Male.	Female	White.	Black	Single	Married	Widowed						Recovered	Died

# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.										REMARKS AND EXPLANATORY NOTES
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Fatal	Death	No of Pregn'y	Age of Patient	Presentation	Sex of Child	Position	Force	X	Pl.	An. Used	Ergot Used	

MEDICAL AND SUR

*From the County of*

for the Month of \_\_\_\_\_

1859.

[illegible]



# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Rescued.	Not Rescued.	Success-ful.	Fil Effects	Death.	No of Pregn'y	Age of Patient	Presen-tation.	Sex of Child	How Deliv.	No. of An. Used.	Ergot Used?		

# MEDICAL AND SUR

*From the County of* \_\_\_\_\_

for the Month of

1859.

[illegible]

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Fillets	Death	No of Pregn'y	Age of Patient	Presentation	Sex of Child	Impress-ion	X	L. An-esthet	Errot Used			

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c.	DATE OF ATTACK	INITIALS OF PATIENT	AGE	SEX		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	Time taken to recovery	Average Duration of Disease.	TERMINATION	
				Male	Female	White.	Black.	Single	Married	Widowed					Recov'd	Died

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.	
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Fil-lets	Death	No. of Preg-nancy	Age of Patient	Presen-tation	Sex of Child	Time of Birth	Weight	Length	Circum-ference	Area of Head	Area of Chest		

**MEDICAL AND SUR**

*From the County of*

*for the Month of*

1859.

[illegible]

# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced.	Not Reduced	Success-ful.	Ill Effects.	Death.	No. of Pregn'cy	Age of Patient	Presentation.	Sex of Child	Position	Force	Instrument	Artificial	Forceps Used?		



# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c.	DATE OF ATTACK	INITIALS OF PATIENT	AGE	SEX		COLOR		CIVIL CONDITION			OCCUPATION	PLACE OF BIRTH	Treated by	Prescribed by	TERMINATION		
				Male	Female	White	Black	Single	Married	Widowed					Recovered	Recovered	Died

# GICAL STATISTICS.

Registered by \_\_\_\_\_ M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Ill Effects	Death.	No of Preg'n'cy	Age of Patient	Presen-tation	Sex of Child	Time of Delivery	Force used	Method of Anesthet	Agent Used			

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DATE OF ATTACK	INITIALS OF PATIENT	AGE	SEX.		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	Time of Death	Cause of Death	Age at Death	TERMINATION	
				Male.	Female	White	Black.	Single	Married	Widowed						Recov'd	Died

# GICAL STATISTICS.

Registered by \_\_\_\_\_ M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD								REMARKS AND EXPLANATORY NOTES
Deform'd	Not Deform'd	Reduced	Not Reduced	Success-ful	Ill Effects	Death	No of Preg'n'cy	Age of Patient	Presen-tation	Sex of Child	Wt. at Birth	Sex of Child	Age at Death	Urgent Used	

**MEDICAL AND SUR**

*From the County of*

for the Month of

1859.

[illegible]

# GICAL STATISTICS.

Registered by \_\_\_\_\_ M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced.	Not Reduced	Success-ful	Fil Effects	Death.	No of Pregn'cy	Age of Patient	Presen-tation.	Sex of Child	Time of Delivery	X	An. Used	Uterus Used	

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DATE OF APPEAR	INITIALS PATIENT	AGE	SEX		COLOR		CIVIL CONDITION			OCCUPATION	PLACE OF BIRTH	Time of Life	Duration of Disease	TERMINATION	
				Male	Female	White	Black	Single	Married	Widowed					Recov'd	Died



# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Rescued.	Not Rescued	Success-ful	Fil Effects	Deaths.	No of Pregn'y	Age of Patient	Presen-tation.	Sex of Child	How Deliv'd	X	Artificial	Errot Usul?			

# MEDICAL AND SUR

From the County of \_\_\_\_\_

for the Month of \_\_\_\_\_

1859.

DISEASES, ACCIDENTS, &c	DATE OF APPEAR	INITIALS OF PATIENT	AGE	SEX		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	Time of Death	Cause of Death	Average Duration of Disease.	TERMINATION	
				Male.	Female	White.	Black.	Single	Married	Widowed						Recor'd	Died

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Injured.	Not Reduced	Success-ful.	Ill Effects	Death.	No. of Pregn'cy	Age of Patient	Presentation.	Sex of Child	How Deliv'd	X	Artificial.	Bract Used			

MEDICAL AND SUR

*From the County of*

*for the Month of*

1859.

DISEASES, ACCIDENTS, &c	DATE OF APPEAR	INITIALS PATIENT	AGE	SEX		COLOR.		CIVIL CONDITION.			OCCUPATION.	PLACE OF BIRTH	Temper- ament	Height in feet	Average Durations in Months.	TERMINATION	
				Male	Female	White	Black	Single	Married	Widowed						Recovered	Died

# GICAL STATISTICS.

Registered by

M. D., Residence,

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD										REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Rescued	Not Rescued	Success-ful	Fil Effects	Death	No of Pregn'y	Age of Patient	Presen- tation.	Sex of Child	Hours in Labor	Force	Art Used	Drugs Used	Remarks	Notes	

**MEDICAL AND SUR**

*From the County of*

*for the Month of*

...1859.

[illegible]

# GICAL STATISTICS.

Registered by \_\_\_\_\_

M. D., Residence, \_\_\_\_\_

RESULT OF ACCIDENTS.				RESULT OF ANAESTHESIA.			OBSTETRICAL RECORD.								REMARKS AND EXPLANATORY NOTES.
Deform'd	Not Deform'd	Reduced.	Not Reduced.	Success-ful.	Ill Effects.	Death.	No. of Pregu'cy	Age of Patient.	Presen-tation.	Sex of Child.	Hours in Labor.	Natural.	Artificial.	Ergot Used?	







